

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re:

JOEL MORALES

Debtor(s)

Case No. 17-07986

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**CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT**

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 03/14/2017.
- 2) The plan was confirmed on 06/06/2017.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 02/27/2018.
- 6) Number of months from filing to last payment: 12.
- 7) Number of months case was pending: 22.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$53,450.89.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

**Receipts:**

Total paid by or on behalf of the debtor	\$7,001.48
Less amount refunded to debtor	\$239.77

**NET RECEIPTS:** **\$6,761.71**

**Expenses of Administration:**

Attorney's Fees Paid Through the Plan	\$4,000.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$320.26
Other	\$371.76

**TOTAL EXPENSES OF ADMINISTRATION:** **\$4,692.02**

Attorney fees paid and disclosed by debtor: \$0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVOCATE MEDICAL GROUP	Unsecured	151.00	NA	NA	0.00	0.00
ADVOCATE TRINITY HOSPITAL	Unsecured	381.00	NA	NA	0.00	0.00
ALFREDO CENTENO	Unsecured	1.00	NA	NA	0.00	0.00
Associates in Rehab Medicine	Unsecured	10.00	NA	NA	0.00	0.00
ATG Credit	Unsecured	190.00	NA	NA	0.00	0.00
BANK OF AMERICA	Unsecured	311.00	NA	NA	0.00	0.00
BUCKEYE CHECK CASHING OF ILLIN	Unsecured	577.50	NA	NA	0.00	0.00
Cergias Billing	Unsecured	71.30	NA	NA	0.00	0.00
Cergias Billing	Unsecured	71.00	NA	NA	0.00	0.00
CERTIFIED SERVICES INC	Unsecured	51.00	NA	NA	0.00	0.00
CHASE BANK	Unsecured	428.00	NA	NA	0.00	0.00
Chicago Sports & Spine	Unsecured	277.69	NA	NA	0.00	0.00
CHICAGO SPORTS AND SPINE	Unsecured	301.00	300.78	300.78	300.78	0.00
CP AGUADA	Secured	1,498.00	NA	NA	0.00	0.00
DASH OF CASH	Unsecured	800.00	1,305.00	1,305.00	1,305.00	0.00
FIFTH THIRD BANK	Unsecured	1,220.00	NA	NA	0.00	0.00
GREEN CIRCLE	Unsecured	1,000.00	NA	NA	0.00	0.00
ICS Inc	Unsecured	25.00	NA	NA	0.00	0.00
ILLINOIS BONE & JOINT INSTITUT	Unsecured	10.00	NA	NA	0.00	0.00
JEFFERSON CAPITAL SYSTEMS LLC	Unsecured	412.00	412.91	412.91	412.91	0.00
JEFFREY KRAMER MDSC	Unsecured	75.00	NA	NA	0.00	0.00
Medical Services RIC	Unsecured	50.00	NA	NA	0.00	0.00
MUTUAL MGMT SER	Unsecured	95.00	NA	NA	0.00	0.00
Neurology Consultants	Unsecured	94.80	NA	NA	0.00	0.00
Northwestern Hospital	Unsecured	142.94	NA	NA	0.00	0.00
OPPORTUNITY FINANCIAL LLC	Unsecured	3,448.43	NA	NA	0.00	0.00
RADIOLOGY PHYSICIANS	Unsecured	12.90	NA	NA	0.00	0.00
RCN	Unsecured	204.00	NA	NA	0.00	0.00
RUSH UNIVERSITY MEDICAL CENTE	Unsecured	43.00	NA	NA	0.00	0.00
RUSH UNIVERSITY MEDICAL GROU	Unsecured	25.00	NA	NA	0.00	0.00
Source Receivables Man	Unsecured	916.00	NA	NA	0.00	0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
Source Receivables Man	Unsecured	576.00	NA	NA	0.00	0.00
SOUTHEAST ANESTHESIA	Unsecured	51.00	51.00	51.00	51.00	0.00
SPORTS & ORTHO	Unsecured	75.00	NA	NA	0.00	0.00

**Summary of Disbursements to Creditors:**

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
<b>Secured Payments:</b>			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
<b>TOTAL SECURED:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Priority Unsecured Payments:</b>			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
<b>TOTAL PRIORITY:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>GENERAL UNSECURED PAYMENTS:</b>	<b>\$2,069.69</b>	<b>\$2,069.69</b>	<b>\$0.00</b>

**Disbursements:**

Expenses of Administration	<u>\$4,692.02</u>	
Disbursements to Creditors	<u>\$2,069.69</u>	
<b>TOTAL DISBURSEMENTS :</b>		<b><u>\$6,761.71</u></b>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 01/07/2019

By: /s/ Tom Vaughn

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Trustee

**STATEMENT:** This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.